

MARICOPA COUNTY ANIMAL CARE & CONTROL ADOPTION AGREEMENT

Adopter's Name:		Phone:	Alternate Phone:
Street Address:		Unit/Apt #:	Email:
City:	State:	Zip:	MICROCHIP, \$25: YES___ NO___ (initial)
Animal ID:	Breed:	Color:	FELV/FIV/HW TEST, \$35: YES___ NO___ (initial)
Gender:	Age:	Prealtered? Y___ N___	HW/TICK FEVER TEST, \$15: YES___ NO___ (initial)
Rabies Vac:	3/1 or 4/1 Vac:	Other:	Other:
Lic Tag:	Microchip #:	Receipt #:	Person ID:

I hereby adopt the above identified pet from Maricopa County Animal Care and Control (MCACC) and agree to and acknowledge the following:

_____ I will be the owner of this dog or cat and I am 18 years of age or older.

_____ I am committed to providing this pet with a lifelong home. I understand that if I return this pet, an owner surrender fee of \$51 may apply.

_____ Refunds or exchanges are not permitted unless veterinary documentation of a critical health issue is provided within 7 calendar days of adoption.

_____ I will notify MCACC if I rehome this pet and will provide MCACC with the new owner's name, address, and phone number for licensing purposes.

_____ I am permitted to own this pet where I currently reside and it is not prohibited by any law, landlord/tenant rules, HOA rules, insurance policies.

_____ I understand and agree that I am not the legal owner of this animal until surgical sterilization is complete and the animal is released to me.

_____ I will provide my pet with necessary and humane care including food, fresh water, shelter, exercise, training, and veterinary care, and will not be cruel, mistreat, or neglect my pet, or any animal, in violation of A.R.S. § 13-2910.

_____ I understand that all dogs over 3 months of age residing in Maricopa County must be licensed, that dog licenses must be renewed annually, and that the license tag must be affixed to a collar or harness on my dog at all times in accordance with A.R.S. § 11-1008 and A.R.S. § 11-1010. I will comply with all municipal, county, state, and federal animal laws including rabies vaccination, dog license and leash laws.

_____ I have determined this pet to be an appropriate addition to my household, compatible with other pets I may have, and with all members of my family. The act of adopting the above identified dog or cat from Maricopa County Animal Care and Control constitutes my understanding there are no implied guarantees or warranties concerning the temperament, health, habits, breed, age, or background of the above identified pet. Any animal has the potential to bite, cause injury, or be destructive. Any costs resulting from the actions of your new dog or cat are solely my responsibility and not that of MCACC.

_____ I understand and agree that MCACC will not reimburse me for any veterinary medical expense incurred for the above identified pet or for other pets in my household, and that MCACC does not have a full service veterinary hospital and cannot provide follow up veterinary care for adopted animals. MCACC is concerned about the health of the dogs and cats adopted from our facilities. **However**, our shelters are public impoundment facilities and we must accept all dogs and cats that are relinquished to MCACC. Stray, loose and owned dogs and cats may have undiagnosed pre-existing health conditions or may have been exposed to infectious diseases or parasites that may not become apparent for several days. Due to this possibility, **MCACC recommends isolating your new pet from other pets until it is seen by your veterinarian or complimentary service veterinarian to determine if it is ready to integrate with other pets. It is recommended that you schedule an examination with a veterinarian within the first 10 days of adoption.**

_____ In consideration of receiving the above identified pet, I hereby indemnify, defend, and hold harmless Maricopa County, its officers, departments, employees and agents from and against any and all suits, actions, legal or administrative proceedings, claims, demands or damages of any kind or nature arising out of this Agreement which are attributed to any act or omission of Adopter, its agents, its pets or anyone acting under its direction, control or on the Adopter's behalf, whether intentional or negligent and from and against all claims of liability for bodily injury or property damage caused by the pet. I acknowledge and hereby indemnify and hold harmless Maricopa County, its officers, departments, employees and agents from and against any medical costs and expenses related to the immediate and future medical needs of the above identified pet.

By my signature below I acknowledge I have read, understand and agree to the above statements:

Adopter Signature _____ Date _____

MCACC Witness _____ Date _____